

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|-------------|-----------------|
| FEE DETERMINATION | <i>IV</i> | <i>32</i> | <i>12-23-01</i> |
| O.I.P.E. CLASSIFIER | <i>CH</i> | <i>1119</i> | <i>12/10</i> |
| FORMALITY REVIEW | | | <i>12-12-01</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 1 | ✓ |
| 2 | ✓ |
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| Claim | Date |
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| Final | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

IC 865
12/13